

CERTIFICATE OF EFS FILING UNDER 37 CFR §1.8

I hereby certify that this correspondence is being electronically transmitted to the United States Patent and Trademark Office, Commissioner for Patents, via the EFS pursuant to 37 CFR §1.8 on the below date:

Date: March 11, 2009 Name: Cynthia M. Bott (Reg. No. 46,568) Signature: /Cynthia M. Bott/

**BRINKS
HOFFER
GILSON
& LIONE**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Appln. of: Tony Roberts et al.

Appln. No.: 10/509,768

Filed: 08/05/2005

For: Motor Vehicle Safety Device

Attorney Docket No.: 12400-018

Examiner: Karen J. Amores

Art Unit: 3616

Conf. No.: 2152

TRANSMITTAL

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

Attached is/are:

☒ Reply under 37 C.F.R. 1.116.

Fee calculation:

☒ No additional fee is required.

☐ Small Entity.

☐ An extension fee in an amount of \$_____ for a _____-month extension of time under 37 CFR § 1.136(a).

☐ A petition or processing fee in an amount of \$_____ under 37 CFR § 1.17(____).

☐ An additional filing fee has been calculated as shown below.

					Small Entity			Not a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	OR	Rate	Add'l Fee
Total	13	Minus	23	0	x \$26=			x \$52=	
Indep.	3	Minus	6	0	x \$110=			x \$220=	
First Presentation of Multiple Dep. Claim					+\$195=			+\$390=	
					Total	\$		Total	\$

Fee payment:

☐ Please charge Deposit Account No. 23-1925 in the amount of \$_____ for _____.

☐ Payment by credit card in the amount of \$_____ (Form PTO-2038 is attached).

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

Respectfully submitted,

March 11, 2009
Date

/Cynthia M. Bott/
Cynthia M. Bott (Reg. No. 46,568)